

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER		2. DATE	
<i>Britton Journal</i>		<i>9/16/13</i>	
3. FREQUENCY OF ISSUE	3A. NO. OF ISSUES PUBLISHED ANNUALLY	3B. ANNUAL SUBSCRIPTION PRICE \$	
<i>Weekly</i>	<i>52</i>	<i>40 00</i>	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers)			
<i>706 7th St. ████████, PO Box 69, Marshall Co., SD 57430-0069</i>			
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers)			
<i>706 7th St. PO Box 69, Marshall Co., Britton, SD 57430-0169</i>			
6. FULL NAME OF PUBLISHER: <i>Douglas M. Card</i>			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)			
FULL NAME		COMPLETE MAILING ADDRESS	
<i>Marshall County Publishing, Inc.</i>		<i>PO Box 69, Britton, SD 57430-0069</i>	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.)			
<i>Charles L. + Karyl P. Card</i>		<i>PO Box 921, Britton, SD 57430-0921</i>	
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)		<i>2000</i>	<i>2000</i>
B. PAID AND/OR REQUESTED CIRCULATION			
1. Sales through dealers and carriers, street vendors and counter sales.		<i>357</i>	<i>357</i>
2. Mail Subscription (Paid and or requested)		<i>1389</i>	<i>1405</i>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)		<i>1746</i>	<i>1762</i>
D. FREE DISTRIBUTION			
1. BY MAIL, CARRIER OR OTHER MEANS		<i>29</i>	<i>29</i>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		<i>23</i>	<i>23</i>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		<i>1798</i>	<i>1814</i>
F. COPIES NOT DISTRIBUTED			
1. Office use, left over, unaccounted, spoiled after printing		<i>196</i>	<i>202</i>
2. Return from News Agents		<i>—</i>	<i>—</i>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)		<i>1994</i>	<i>2016</i>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

Douglas M. Card
(Signature)

owner _____

(Title)

Sworn to before me this 18 day of Sept, 2013
Kim M. Buhl
Notary Public

My commission expires: My Commission Expires March 12, 2016

State of South Dakota

County of Marshall

(Seal)

Form: SOS REC 051 7/2004

